

BABYLON COMMUNICATIONS LIMITED
t/a CLEARVISION COMMUNICATIONS

35 Kilkenney Drive, Dannemora, Auckland.
Tele: 09 271 4143. Fax: 09 271 4142. Mobile: 021 535 236
Email: admin@clearvision.net.nz

ACCOUNT APPLICATION FORM

ENTITY DETAILS:

Applicant's Full Legal Name (i.e. not trading name): ("the Customer")

(Please tick) Sole Trader Individual Partnership Ltd Company Other (please state):

Trading as: Postal Address:

Physical Address: Email:.....

Nature of Business: Years in Business:..

Telephone: Fax: Date of Birth:

Contact Name & Position:

OWNERSHIP please insert Owner(s) / Directors Name(s) in full

1:..... Address:

2:..... Address:

If LIMITED liability company - Address of Registered Office: .

Date of Incorporation: Incorporation No: ..

FINANCIAL & PROFESSIONAL ADVISORS

Shareholders Funds: Paid Up:

Name of Accountant: Solicitor:

Bank:..... Branch: Acct No:

TRADE REFERENCES			
Company	Contact Name	Phone Number	Account open since

General Description of Products and Services to be provided:

.....

I/We have read and agree to be bound by the terms and conditions of trade as printed overleaf or attached. I/We warrant to Babylon Communications Ltd t/a ClearVision Communications that the above information is to the best of my/our knowledge, information and belief true and correct and that I/we am/are duly authorised to enter into this application and future contracts on behalf of the Customer. I/we also acknowledge that pursuant to the personal guarantee contained in the terms and conditions of trade that, where relevant, I/we am/are also signing this application form in my/our personal capacity.

Signed Print Name Designation

Dated this day of 20.....

If the applicant is a company then this application form must be signed by a company director of the company.